## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105505

City-St-Zip:

Entity Name: TOTAL HOME HEALTH CARE, LLC

FILED Jul 26, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 310 WEST 5TH STREET 1209 EAST 11TH STREET PANAMA CITY, FL 32401 PANAMA CITY, FL 32401 US **Current Mailing Address: New Mailing Address:** 310 WEST 5TH STREET 1209 EAST 11TH STREET PANAMA CITY, FL 32401 PANAMA CITY, FL 32401 US FEI Number: 20-3756084 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PIERSON, GEORGIA PIERSON, GEORGIA 1703 EAST 9TH STREET 1209 EAST 11TH STREET US US PANAMA CITY, FL 32401 PANAMA CITY, FL 32401 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: GEORGIA PIERSON 07/26/2007 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete STANLEY, JUDY L Name: Name: Address: 1409 STONEBRIDGE DRIVE Address: City-St-Zip: GRETNA, LA 70056 City-St-Zip: Title: Title: MGR ( ) Change (X) Addition () Delete Name: Name: GEORGIA, PIERSON Address: Address: 1209 EAST 9TH STREET

City-St-Zip:

PANAMA CITY, FL 32401 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GEORGIA PIERSON MGR 07/26/2007